

3RD DAILY CARDIOLOGY SYMPOSIUM

CONCISE, PRECISE, PRACTICAL

2nd Day, 1st Panel, 1st Lecture

Pericardial Emergencies

Pharmacologic treatment of acute pericarditis



Learning Objectives & Case Vignette

Learning Objectives

- Decision for outpatient vs inpatient treatment of acute pericarditis
- Considerations for activity restriction in acute pericarditis
- Rules of medical therapy (class, agents of choice, dose, duration & tapering)
 - NASIDs, Colchicine, Glucocorticoids, Novel agents
- Treatment options for recurrent pericarditis
- Indications for GI protection in patients under treatment for acute pericarditis

Case Vignette

- 48 Y/O lady, high school teacher with unremarkable PMH
- Came to the ED with sharp and pleuritic chest pain from a day ago

The pain improves by sitting up and leaning forward
- She doesn't report dyspnea or N/V, there is no other accompanying sign or symptom
- ECG: sinus tachycardia, widespread concave ST-elevation with reciprocal ST-depression in I and aVR
- Ph/E:
 - Afebrile, BP: 126/81 mmHg, HR: 102 bpm, heart and lungs clear

Case Vignette con.

- Cardiac markers come back negative
- CXR is unremarkable
- Bedside echo in the ED:
 - NL EF, No WMA, No pericardial effusion
- A diagnosis of acute pericarditis is made

What is the recommendation for the management of this patient?

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Daily Cardiology Symposium 1402**

Pericardial Emergencies

Tir 23rd, 09:30 – 11:00

Pharmacologic treatment of acute pericarditis

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